

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

Serial No. 10/596,180 Filing Date

Applicant(s)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
	1	/						51	/				
2		/						52	/				
3		/						53	/				
4		/						54	/				
5		/						55	/				
6		/						56	/				
7		/						57	/				
8		/						58	/				
9		/						59	/				
10		/						60	/				
11		/						61	/				
12		/						62	/				
13		/						63	/				
14		/						64	/				
15		/						65	/				
16		/						66	/				
17		/						67	/				
18		/						68	/				
19		/						69	/				
20		/						70	/				
21		/						71	/				
22		/						72	/				
23		/						73	/				
24		/						74	/				
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26		/						76	/				
27		/						77	/				
28		/						78					
29		/						79					
30		/						80					
31		/						81					
32		/						82					
33		/						83					
34		/						84					
35		/						85					
36		/						86					
37		/						87					
38		/						88					
39		/						89					
40		/						90					
41		/						91					
42		/						92					
43		/						93					
44		/						94					
45		/						95					
46		/						96					
47		/						97					
48		/						98					
49		/						99					
50								100					
TOTAL IND.			↓		↓		↓	TOTAL IND.	4	↓		↓	
TOTAL DEP.			←		←		←	TOTAL DEP.	72	←		←	
TOTAL CLASOS			████████		████████		████████	TOTAL CLASOS	76	████████		████████	